

### Older people's knowledge often a living centers of the third age about HIV/AIDS

Oliveira, Adélia Dalva da Silva; Rodrigues, Livia Moreira de Carvalho; Silva, Maria Nauside Pessoa da; Silva, Erisonval Saraiva da; Lago, Eliana Campelo; Silva, Lília Maria Monteiro de Oliveira e

Veröffentlichungsversion / Published Version  
Zeitschriftenartikel / journal article

#### Empfohlene Zitierung / Suggested Citation:

Oliveira, A. D. d. S., Rodrigues, L. M. d. C., Silva, M. N. P. d., Silva, E. S. d., Lago, E. C., & Silva, L. M. M. d. O. e. (2013). Older people's knowledge often a living centers of the third age about HIV/AIDS. *Revista de Pesquisa: Cuidado é Fundamental Online*, 5(6), 248-255. <https://nbn-resolving.org/urn:nbn:de:0168-ssoar-54907-6>

#### Nutzungsbedingungen:

Dieser Text wird unter einer CC BY-NC Lizenz (Namensnennung-Nicht-kommerziell) zur Verfügung gestellt. Nähere Auskünfte zu den CC-Lizenzen finden Sie hier: <https://creativecommons.org/licenses/by-nc/4.0/deed.de>

#### Terms of use:

This document is made available under a CC BY-NC Licence (Attribution-NonCommercial). For more Information see: <https://creativecommons.org/licenses/by-nc/4.0>



RESEARCH

Older people's knowledge often a living centers of the third age about HIV/AIDS

Conhecimento de idosos participantes de um centro de convivência da terceira idade sobre HIV/AIDS  
Conocimiento de ancianos participantes de un centro de convivencia de la tercera edad sobre el VIH/SIDA

Adélia Dalva da Silva Oliveira<sup>1</sup>, Livia Moreira de Carvalho Rodrigues<sup>2</sup>, Maria Nauside Pessoa da Silva<sup>3</sup>, Erisonval Saraiva da Silva<sup>4</sup>, Eliana Campelo Lago<sup>5</sup>, Lília Maria Monteiro de Oliveira e Silva<sup>6</sup>

ABSTRACT

**Objective:** To assess the knowledge of elderly participants in the Living Center for Senior Citizens on HIV / AIDS. **Method:** An exploratory and descriptive study with a qualitative approach, conducted through interviews with 17 elderly participants in the Living Center for Senior Citizens in Teresina-PI. The data analysis allowed us to establish three categories: knowledge of elderly HIV / AIDS; methods used by the elderly in the prevention of HIV / AIDS and health education in the prevention of HIV / AIDS. **Results:** The elderly hold little knowledge about HIV / AIDS, with an emphasis on prevention, transmission and susceptibility of contracting HIV at any stage of life. Few subjects reported on the use of an adequate method of prevention. **Conclusion:** We emphasize the importance of Health Education as a strategy to improve the knowledge of the elderly population about important aspects of HIV / AIDS, mainly with regard to the myths related to the mode of transmission. **Descriptors:** AIDS, Elderly, Prevention.

RESUMO

**Objetivo:** Analisar o conhecimento de idosos participantes de um Centro de Convivência da Terceira Idade sobre HIV/AIDS. **Método:** Estudo exploratório e descritivo, com abordagem qualitativa, realizado por meio de entrevista com 17 idosos participantes de um Centro de Convivência da Terceira Idade em Teresina-PI. A análise dos dados permitiu estabelecer três categorias: conhecimento de idosos sobre HIV/AIDS; métodos utilizados pelos idosos na prevenção da HIV/AIDS e educação em saúde na prevenção de HIV/AIDS. **Resultados:** Os idosos detêm pouco conhecimento sobre o HIV/AIDS, com ênfase na prevenção, na transmissão e na susceptibilidade de contrair o vírus HIV em qualquer fase da vida. Poucos idosos relataram sobre a utilização de um método adequado de prevenção. **Conclusão:** Ressalta-se a importância da Educação em Saúde como uma estratégia para melhorar o conhecimento da população idosa sobre os aspectos importantes do HIV/AIDS, principalmente no que diz respeito aos mitos relacionados à forma de transmissão. **Descritores:** AIDS, Idoso, Prevenção.

RESUMEN

**Objetivo:** Evaluar el conocimientos de los ancianos participantes en el Centro de Convivencia de la Tercera Edad acerca del VIH / SIDA. **Método:** Estudio exploratorio y descriptivo, con abordaje cualitativo, realizado a través de entrevistas con 17 ancianos de un Centro de Convivencia de la Tercera Edad en Teresina-PI. El análisis de los datos permitió establecer tres categorías: conocimiento de los ancianos acerca de VIH / SIDA; los métodos utilizados por los ancianos en la prevención del VIH / SIDA y la educación en salud en la prevención del VIH / SIDA. **Resultados:** Los ancianos tienen poco conocimiento acerca del VIH / SIDA, con énfasis en la prevención, la transmisión y en la susceptibilidad de contraer el virus VIH en cualquier etapa de la vida. Pocos ancianos informaron sobre el uso de un método adecuado de prevención. **Conclusión:** Se resalta la importancia de la Educación en Salud como una estrategia para mejorar el conocimiento de la población de edad avanzada sobre aspectos importantes del VIH / SIDA, en particular en relación con los mitos relacionados con el modo de transmisión. **Descriptor:** SIDA. Anciano. Prevención.

<sup>1</sup> Nurse. Master in Public Policy by UFPI. Head of the course of Nursing in UNINOVAFAPI. Email: aoliveira@uninovafapi.edu.br

<sup>2</sup> Nurse. Specialist in Family Health and Urgent and Emergency . Email: liviarodrigues@gmail.com

<sup>3</sup> Nurse. Teaching Specialist, Intensive Care and Nursing in Cardiology. Masters Student in Family Health by UNINOVAFAPI.

<sup>4</sup> Nurse. Specialist in Intensive Care and Nursing in Cardiology. Email: erisonva@vipcursoonline.com.br

<sup>5</sup> Nurse. Doctorate in Biotechnology by UFPI. Professor of the Master of Science in Family Health UNINOVAFAPI. Email: eliana@uninovafapi.edu.b

<sup>6</sup> Nutritionist. Specialist in Hospital Administration. Masters Student in Family Health by UNINOVAFAPI. Email: liliamonteiro@ceut.com.b

INTRODUCTION

Aging is a process common to all living beings, a phenomenon characterized by several changes in humans, such as individual, family and social changes. This is a natural follow-up of progressive reduction in the functional reserve of the people, in which, under normal conditions, usually do not cause any problems, but under overload conditions can cause pathological conditions.<sup>1</sup>

The process of aging is continuous and starts from the beginning of the formation of individual still in the womb. Growing old is not a distant phenomenon, is something that is very present today the demographic transition is invincible process in which results from physiological, psychological and social changes, and some seniors are more aged, others appear younger and there are still those who feel without any use.<sup>2</sup>

Aging is assimilated with continuity, a process that lasts a lifetime, difficult to define with precision, complicated to say who is part or not of the third age group, even by the very acceptance of individual part of this group.<sup>3</sup>

Brazil follows the Elderly Statute, Law No. 10.741, of October 1, 2003, which states that elderly individuals is the one who is aged 60 or older, and still ensures against any physical harm or moral, covering their fundamental rights in pursuit of a better quality of life.<sup>4</sup>

The population of the elderly in Brazil has been growing rapidly. It is estimated that in 2020 the population of people over 60 will be 30 million, representing 13% of the population. This is the result of better quality of life and reduction in fertility rates and mortality.<sup>5</sup>

With the improvement in quality of life through technological advances in medicine and in health care in general, individuals above 60 years of age are becoming more socially active, and J. res.: fundam. care. online 2013.dec. 5(6): 248-255

*Older people's knowledge often a living...* prolong their sex life, which can be associated with increased cases of Acquired Immunodeficiency Syndrome (AIDS) in the elderly.<sup>6</sup>

There is evidence that AIDS has begun in Africa and disseminated by the countries of Europe, the United States and Haiti through the migrations of peoples in these regions. Brazil was not out of the script of this epidemic, and in the Southeast its largest number of cases of the disease, making it one of the major public health problems today.

Were reported from 1980 to July 2007, 474,273 cases of AIDS in Brazil - 289 074 in the Southeast, 89,250 in the South, the Northeast 53,089, 26,757 and 16,103 in the Midwest in the North. In the South, Southeast and Midwest regions, the incidence of this disease tends to stabilize. In the North and Northeast, the trend is increasing.<sup>7</sup>

Piauí was reported the first case of AIDS in 1987, diagnosed in 1986. From 1986 to 2006 were reported in Piauí State 2,652 AIDS cases over 13 years of age, with a growing trend.<sup>8</sup>

The AIDS virus is transmitted during all stages of infection, and the proportional hazards of viremia, which occurs through sexual and parenteral route, in which, if found in the blood, seminal fluid, vaginal, secretions, amniotic fluid, and breast milk infected persons, and sexual route is more representative of the number of transmissions of the virus. Regarding perinatal spread of HIV can occur in utero, during birth or breastfeeding.<sup>9</sup>

One of the ways to prevent HIV / AIDS is through the elimination of risk behaviors such as unprotected sex, sharing needles, transfusion of unscreened blood. Some educational programs that have been created are of great importance, as they seek to spread information to people about the disease and its prevention and make them aware of the importance to take care to avoid disease transmission.

Oliveira ADS, Rodrigues LMC, Silva MNP *et al.*

With advances in medicine and in the pharmaceutical industry, from deeper knowledge of the behavior of HIV-infected persons was possible to produce anti-retroviral drugs for combined use, "cocktail", which displays efficiency in elevated lymphocyte count T CD4 + and decrease in plasma HIV RNA titles thereby reducing the progression of the disease, reduces the incidence of opportunistic complications increases survival and improve quality of life of those infected.<sup>10</sup>

Unfortunately, even with the advances in medicine, has not yet found a preventive HIV vaccine, points out that would be the primary tool currently to combat this epidemic, and is a breakthrough in the treatment of millions of individuals who have AIDS if therapeutic vaccine.<sup>11</sup>

The epidemiological profile of the AIDS epidemic goes through changes due to the inclusion of new population groups infected with HIV, such as women, children, teens and seniors, featuring the heterosexualization and feminization, juvenization and internalizing pathology, in which, at the beginning of the epidemic AIDS, the disease remained in homosexuals, people who performed blood transfusions and drug users.<sup>12</sup>

Considering that HIV / AIDS is a major public health problem and the number of infected older people is increasing every year in Brazil, due to the association of population growth in this age group with pharmaceutical and medical innovations, which extends your sex life, it becomes important scientific production studies that bring clarification on this issue.

To reflect on HIV / AIDS in the elderly was elected as the object of this study: Knowledge of elderly participants in the Living Center for Senior Citizens on HIV / AIDS.

This study is relevant for the current theme and will serve as theoretical background for conducting scientific research on the subject, directed specifically at students and / or health

*Older people's knowledge often a living...*  
professionals interested in improving their knowledge on the subject.

Thus the following guiding question of this study has been: What knowledge of elderly participants in the Living Center for Senior Citizens on HIV / AIDS? And it has as objective to analyze the knowledge of elderly participants in the Living Center for Senior Citizens on HIV / AIDS.

METHODOLOGY

To fulfill the purposes, it was performed an exploratory and descriptive study with a qualitative approach. Exploratory research aims to provide greater familiarity with the problem, trying to make it more explicit or construct hypotheses for the purpose of improvement ideas or the discovery of intuition.<sup>5</sup>

In the descriptive research, the facts are observed, recorded, analyzed, classified and interpreted without the researcher to manipulate the phenomenon of the physical and human world studied and can identify characteristics of certain population or phenomenon.<sup>13</sup>

Qualitative research allows to easily describe the complexity of a given problem, understand and classify dynamic processes experienced by social groups, contributing to the change process, creation or formation of opinions of a given group and allow in greater level of depth, the interpretation the particularities of the behaviors or attitudes of individuals.<sup>14</sup>

This study was conducted in a Living Center for Senior Citizens (CCTI) in Teresina-PI, where are regularly offered various activities such as: biodanza, classes of forró, capoeira, choir, physical activities, among others, for elderly residents in the city of

Oliveira ADS, Rodrigues LMC, Silva MNP *et al.* Teresina. It values the humanization, the respect and the right of seniors by providing interdisciplinary care, active aging and quality of life.

Data collection was conducted during the month of April 2010, through the interview technique, using an instrument a semi-structured interview guide containing subjective questions to 17 elderly participants. The interviews were recorded, transcribed in full and analyzed. Data were analyzed based on the steps of operation, which involved the following steps: Pre-analysis, material exploration, processing and interpretation of the results.

The elderly guests confirmed the availability and authorization to participate in this study by signing the informed consent form (ICF), individually ensuring their anonymity.

The study followed the ethical guidelines of Resolution No. 466/2012, which deals with regulatory guidelines for research involving humans, after approval and final opinion of the Ethics Committee.

RESULTS AND DISCUSSION

Of the elderly interviewed, 12 (70%) are female, 7 (41%) were married, 5 (30%) with incomplete education to elementary schools 14(82%) aged between 60-79 years. The interview analysis allowed to establish three distinct categories: Knowledge of elderly about HIV / AIDS, methods used by the elderly in the prevention of HIV / AIDS, Health education in the prevention of HIV / AIDS.

Older people's knowledge often a living...  
Knowledge of seniors about HIV / AIDS

AIDS is a pathology transmitted through sex, blood (parenteral and from mother to child during pregnancy, during childbirth or postpartum) and in breast milk, and having as risk factors multiple sexual partners without condom use, use of blood or blood derivatives without quality control, shared use of syringes and needles. The speeches of the elderly focus a bit this conception Aids:

*It is a disease transmitted through sexual intercourse and blood [...] (Interview 16)*

*AIDS is caught by sex, manicure and injection needles [...] (Interview 5)*

*Regarding AIDS, is very vulnerable in the world, people swapping partners, unhygienic, [...], do not use condoms ... (Interview 7)*

The HIV virus is present in vaginal secretions, semen, blood, amniotic fluid and breast milk, so it needs contact with these materials to occur transmission of the virus, which does not occur through kissing on the face and mouth, hug, handshake.<sup>9</sup> The following statements show the opposite thought to that knowledge:

*[...] You caught if you don't have hygiene, do not wash well your hands [...] (Interview 4)*

*[...] kissing randomly where they walk around [...] (Interview 7)*

There are seniors who still have mistaken thoughts in relation to transmission of HIV / AIDS, which can be observed in previous statement, and including, in other recent studies.

Not yet managed a healing treatment for AIDS, but through advances in knowledge of the pathogenesis of HIV infection, it was possible to



Oliveira ADS, Rodrigues LMC, Silva MNP *et al.* produce a cocktail of drugs to control the disease and reduce the incidence of opportunistic complications. Some participants portray this knowledge, observed as follows:

[...] AIDS is a disease that has no cure, but the person may have a longer life through treatment, if performed at the beginning [...] (Interview 15)

The main means of transmitting the HIV / AIDS is through unprotected sex, an activity that is not exclusively practiced by the young and the elderly are increasingly gaining their freedom in this sense, a result attributed to improved quality of life and advances in healthcare. Therefore, any person practicing unprotected sex may be subject to contracting HIV / AIDS. Most participants showed that knowledge, demonstrated in the following statements:

[...] Male or female, if does sexual intercourse, can get AIDS, regardless of age [...] (Interview 15)

I think many young and women who you see around, are easier to get AIDS, but today it is everywhere, old people too [...] is worldwide. (Interview 8)

The number of sexual relations between people over 50 years has increased due to the emergence of medication that improves sexual activity. Associated to this, unprotected sex, lack of knowledge of the society about the growing number of cases of elderly HIV-infected and active participation of individuals in this age group, in social life contributes to the increased incidence of AIDS in older people, threatening public health.<sup>17</sup>

As the speeches show, it is noticed that most of the elderly have some knowledge in relation to transmission, prevention, treatment of HIV / AIDS and / or susceptible people, but there are still those who show not have adequate

*Older people's knowledge often a living...* knowledge about the disease, primarily with regard to transmission.

**Methods used by the elderly in the prevention of HIV / AIDS**

The multiplicity of sexual partners without condom use, use of blood or blood derivatives without quality control (nearly banned in Brazil), the sharing of syringes and needles are not sterilized sharps injuries without the use of PPE (Personal Protective Equipment ), pregnancy in HIV-infected women and receiving organs or semen of infected donors are risk factors that are related to the transmission of HIV / AIDS. The following statements show that some older people are protecting themselves adequately against the spread of HIV:

*I always avoid relationships with many people, this is to avoid different numbers of sex partners, fewer partners as less risk of catching the AIDS (Interview 16)*

*My husband and I, we preserves ourselves using condoms (Interview 7)*

*Forewarn me with condoms in relationships with people (Interview 6)*

Thus, it can be observed that even the majority of elderly showing knowledge about the main form of prevention against HIV / AIDS, only two confirmed condom use in their sexual relationships, thereby promoting increased risk of transmission of this pathology in people of this age, needing, so greater attention from public policy, with regard to this issue.

**Health education in the prevention of HIV/AIDS**

The health education it is a way to generate and apply the knowledge in the search of the good human development being a tool of emancipation, in which provides fortification of the taken of autonomous decision of the individuals.<sup>18</sup> One of the forms to develop health education is through of educational lectures, like observed in the following statement:

*[...] here at the Living Center of Elderly, we always receive lectures about AIDS, then we get enlightened. (Interview 7)*

Currently, the information and the media are essential. The television is the product more influent in the way of thinking and in the behavior of the Brazilian citizens, what can be show in the following statement:

*[...] I heard about AIDS by the television, with this we can be informed about everything. (Interview 13)*

*In television I saw what people need to do to avoid AIDS. (Interview 16)*

It can be highlight the importance of Health Education to the development of the critic conscience of the population about their health issues, as a stimulating strategy in the search of solution and organization to a collective action.

CONCLUSION

Aging is a continous process, which results in physiologic, psychological and social alterations, aiming the improvement the quality of life of people by mean of the technological advances in medication and in the area of general health.

*Older people's knowledge often a living...*  
The elderly are even more active socially, moreover of the extension of their sexual life, what can be associated to the increase of the transmission of the HIV/AIDS virus.

The HIV/AIDS virus can be transmitted by unprotected sex, sharing of needles or another sharp-edged object, blood transfusion without control, mother to child during gestation, during birth or by breastfeeding.

This study appoint that the elderly are directly vulnerable to the HIV/AIDS virus. It is observed that, beside the little knowledge, still are many gaps and beliefs, mainly about the transmission.

Therefore, considering the objectives of this study, the analyzed depoiments allowed to conclude that, in general, elderly hold little knowledge about the HIV/AIDS virus, with emphasis in the prevention, in the transmission and in the susceptibility of contract the HIV virus in any stage of life. Few elderly reported about the utilization of a proper method of prevention of the disease. However, are those who believe in myths related about the transmission way.

Emphasizes the importance of Health Education as a strategy to improve the knowledge of elderly population about the important aspects of HIV/AIDS, mainly about the myths related to the transmission form.

REFERÊNCIAS

1. Brasil. Ministério da Saúde. Secretaria de Atenção à Saúde. Departamento de Atenção Básica. Envelhecimento e a saúde da pessoa idosa. Brasília, 2006a.

2. Figueiredo NMA, Tonini T. Gerontologia: atuação da Enfermagem no Processo do Envelhecimento. São Caetano do Sul, SP: Yendis Editora, 2006.

Oliveira ADS, Rodrigues LMC, Silva MNP *et al.*

3. Archanjo DR, Archanjo LR, Silva LL. Saúde da Família na Atenção Primária. Curitiba: Ibpex, 2007.

4. Brasil. Ministério da Saúde. Estatuto do Idoso. 2ed. ver. Brasília, 2006b.

5. Gil AC. Como elaborar projetos de pesquisa. 4ª ed. São Paulo: Atlas, 2006.

6. Souza M. Assistência de enfermagem em infectologia. São Paulo: Atheneu, 2006.

7. Brasil. Ministério da Saúde. Programa Nacional de DST/AIDS. Boletim Epidemiológico AIDS/DST. Brasília-DF: 2007. Disponível em: <http://www.aids.gov.br/data/Pages/LUMIS1D4E2FEBPTBRIE.htm#>

8. Piauí. Secretaria de Saúde do Estado. Boletim Epidemiológico da AIDS. Teresina-PI. ano I. n 01. 2006.

9. Smeltzer SC, Bare BG. Brunner & Suddarth, tratado de enfermagem médico-cirúrgico. 10 ed. Rio de Janeiro: Guanabara Koogan, 2006.

10. Brasil. Ministério da Saúde. Secretaria de Vigilância em Saúde. Departamento de Vigilância Epidemiológica. Doenças Infecciosas e Parasitárias: guia de bolso. 7 ed. rev. Brasília, 2008.

11. Veloso JC. AIDS e o desafio para a descoberta de uma vacina. Saúde Coletiva, Portugal, ano 4, 15 ed., p. 71, maio-jun, 2007.

*Older people's knowledge often a living...*

12. Castro GMM *et al.* Aids na Terceira Idade: Vulnerabilidade dos idosos residentes em um abrigo no município de Teresina-PI. 2007. 60f. Trabalho de Conclusão de Curso (Graduação de Enfermagem) - NOVAFAP: Teresina-PI, 2007.

13. Andrade MM. Introdução à metodologia do trabalho científico. 6 ed. São Paulo: Atlas, 2003.

14. Oliveira S L. Tratado de Metodologia Científica: Projetos de Pesquisas, TGI, TCC, Monografias, Dissertações e Teses. São Paulo: Pioneira Thomson Learning, 2000.

15. Brasil. Ministério da Saúde. Secretaria de Vigilância em Saúde. Guia de Vigilância Epidemiológica. 6 ed. Brasília, 2005.

16. Souza MHT *et al.* Nível de Conhecimento de um Grupo de Idosos em Relação à Síndrome da Imunodeficiência Adquirida. Av. enferm:27(2):22-29, ene.-jul. 2009. Disponível em: <[http://www.enfermeria.unal.edu.co/revista/articulos/xxvii1\\_3.pdf](http://www.enfermeria.unal.edu.co/revista/articulos/xxvii1_3.pdf)>.

17. Bertoncini BZ, Moraes KS, Kulkamp IC. Comportamento sexual em adultos maiores de 50 anos infectados por HIV. Jornal Brasileiro Doenças Sexualmente Transmissíveis. 19 (2), 75-79, 2007. Disponível em: <http://bases.bireme.br/cgi-bin/wxislind.exe/iah/online/>

18. Chagas MAP, Ximenes LB, Joege MSB. Educação em Saúde e interfaces conceituais: representações de estudantes de um curso



Oliveira ADS, Rodrigues LMC, Silva MNP *et al.*  
de enfermagem. Revista Brasileira de  
Enfermagem, Brasília-df, p.91-101, 2007.

*Older people's knowledge often a living...*

**Received on: 09/04/2013**

**Required for review: no**

**Approved on: 25/10/2013**

**Published on: 27/12/2013**